

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
	1	1										
2		1										
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50												
TOTAL IND.	2		↓			↓			↓			
TOTAL DEP.	22	↔		↔		↔		↔				
TOTAL CLAIMS	24											

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS